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Group Health Plans and Health Insurance Issuers: Internal Claims and Appeals and External Review Processes

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General Comment

On behalf of Advocates for Basic Legal Equality, I wish to comment on the 10% threshold for translation and oral interpretation of private plan materials in the internal review and appeals contexts. I am a managing attorney and supervise the staff that provides translation/interpretation to our LEP client. Due to the changing demographics in the country the LEP population is increasing while at the same time its also more geographically diverse. Thus a 10% threshold/standard is far too high. A more appropriate standard would be "5% of the plan's population or 500 persons in plan's service area" for large group plans, and 25% of population for small plans. Oral interpretation should be provided in all languages at all times. Health care access and communication with their doctors, clinics and hospitals is a critical necessity which if not done because of language restrictions can result in a life threatening event.